



SACRAMENTO COUNTY HEALTH AUTHORITY COMMISSION

MEETING 2: BYLAWS, CALAIM, & COMMISSION CALENDAR

April 13, 2021

Agenda Item 1:

Welcome and Opening Remarks

Agenda Item 2:

Agenda Review

Agenda

1. Welcome/Opening Remarks
2. Agenda Review
3. Approval of Minutes
4. Health Authority Administration: Bylaws
5. CalAIM Overview
6. 2021 Commission Calendar
7. Public Comment
8. Closing Comments, Next Steps and Adjournment

Agenda Item 3:

Approval of Minutes

Agenda Item 4:

For Discussion and Action: Health Authority Bylaws

Proposed SCHA Bylaws

I. Name

II. Authority

III. Responsibilities

IV. Membership

V. Officers

VI. Meetings

VII. Advisory Committees

VIII. Reports

IX. Budget

X. Rules of Order

XI. Amendments

Agenda Item 5:

Presentation

CalAIM Overview

Poll:

How familiar are you with CalAIM?

1. Very familiar
2. Somewhat familiar
3. Not very familiar
4. Not sure

California Advancing and Innovating Medi-Cal (CalAIM) Overview

Gelmy Ruiz

Health Management Associates

April 13, 2021

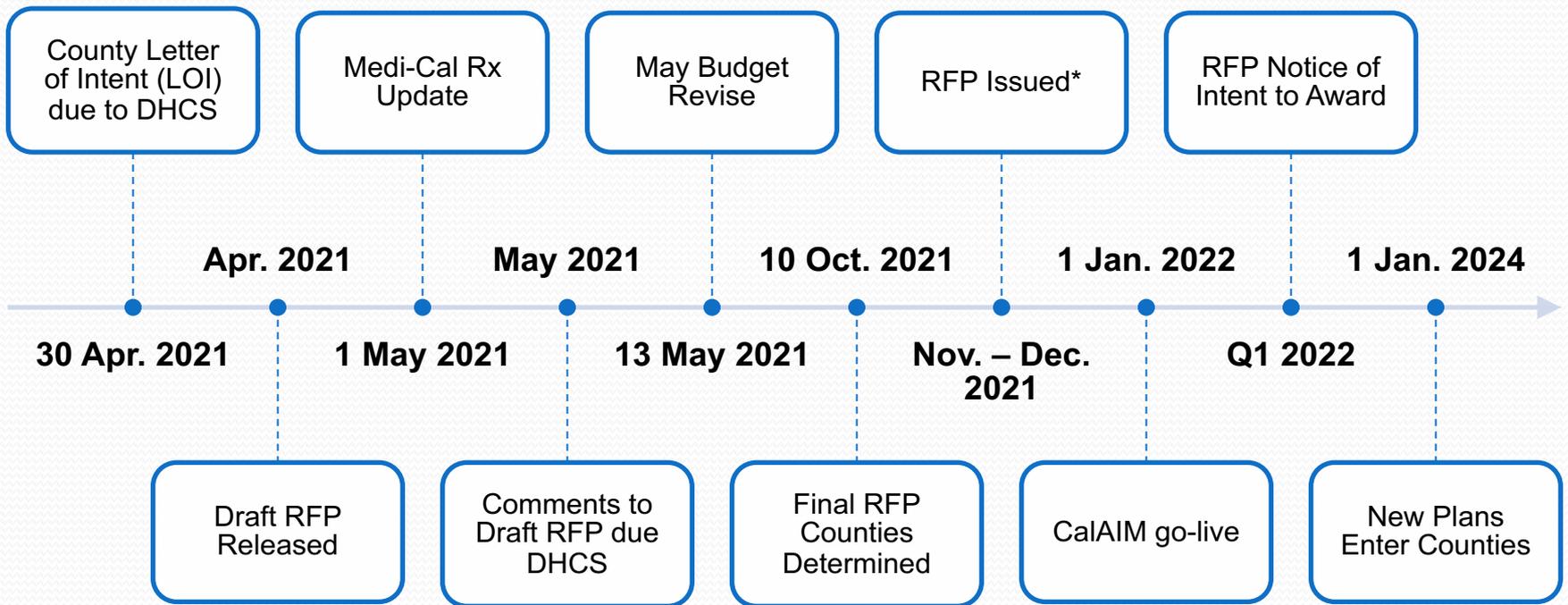
Agenda

- Medi-Cal Overview
 - Background
 - Request for Proposal (RFP) Process and Timeline
- CalAIM Overview
- CalAIM Goals
- Highlighted Key Components
 - Enhanced Care Management
 - In Lieu of Services
 - Population Health Management
- Timeline for Implementation of Key Components
 - In 2022
 - Beyond 2022

Medi-Cal Overview

- Medi-Cal is administered by the California Department of Health Care Services (DHCS), who is responsible for:
 - Monitoring the quality of purchased services
 - Ensuring that state and federal funds are not spent improperly or fraudulently
 - Collecting and reporting information necessary for demonstrating the efficient and effective administration of the Medi-Cal program
 - Resolving grievances by applicants, enrollees, providers and health plans
- In Sacramento County, Medi-Cal Managed Care Enrollment is 475,585 (DHCS Enrollment report March 2021)

Medi-Cal Request for Proposal (RFP) Process and Timeline



*Estimate

CalAIM Goals

- Identify and manage member risk and need through **whole person care approaches** and **addressing Social Determinants of Health (e.g., housing)**
- Move Medi-Cal to a more consistent and seamless system **by reducing complexity and increasing flexibility**
- **Improve quality** outcomes, **reduce health disparities**, and drive **delivery system transformation** and innovation through value-based initiatives, modernization of systems and payment reform

Key Components

- Enhanced Care Management (ECM): provide multiple opportunities to engage high-cost or “high-need” Medi-Cal beneficiaries (~2-5% of MCP enrollees) and provide a set of services that extend beyond standard care coordination and chronic disease management
- In Lieu of Services (ILOS): payment for flexible wrap-around services or settings that substitute to avoid other potentially more costly services, such as inpatient hospitalization or a nursing facility stay, focusing primarily on medium- to-high risk beneficiaries
- Population Health Management Strategy – January 2023

In Lieu of Services

- Housing transition navigation services, housing deposits, housing transition and sustaining services
- Short-term post-hospitalization housing, recuperative care, respite, day habilitation programs
- Nursing facility transition/diversion to assisted living facilities, nursing facility transition to home, personal care and homemaker services, environmental accessibility adaptation (home modifications), meals/ medically tailored meals
- Sobering centers
- Asthma remediation

Key Components - 2022 Launch

January 2022

- Enhanced Care Management (ECM)/In Lieu of Services (ILOS) (existing WPC/HHP target populations)
- Incentive Payments
- Dental Transformation Initiative

July 2022

- Enhanced Care Management (ECM) (additional target populations)
- Proposal for SMI/SED Section 1115 Demonstration

Key Components – Beyond 2022

2023

- Population Health Management
- Enhanced Care Management (ECM) for individuals transitioning from incarceration
- Mandatory Medi-Cal Application and Behavioral Health Referral upon Release from Jail and County Juvenile Facilities

2027

- Full Integration Plans

2021 Timeline

| Dates | Key Implementation Milestones |
|-----------------|---|
| April - June | <ul style="list-style-type: none">• Release draft MCP rates for ECM (May/June)• Release additional ECM/ILOS materials, including ILOS pricing guidance |
| July - December | <ul style="list-style-type: none">• MCPs submit ECM/ILOS Model of Care for WPC/HHP, for DHCS review/approval (July)• Begin stakeholder process for county inmate pre-release application process• Publish update process for County Performance Standards monitoring & reporting• Anticipated approval of 1115 and 1915(b) waiver/renewal requests |

Agenda Item 6:

2021 Commission Calendar and Process

2021 Commission Calendar

| Month | Key Objectives |
|------------------|---|
| April | <ul style="list-style-type: none">• Review draft RFP |
| May | <ul style="list-style-type: none">• Submit comments re: draft RFP to DHCS• Review and interview plans re: CalAIM ECM/ILOS Model of Care• Public testimony |
| June - September | <ul style="list-style-type: none">• Comprehensive interview of current GMC managed care plans and interested plans |
| October | <ul style="list-style-type: none">• Select recommended managed care plans |
| Nov. – Dec | <ul style="list-style-type: none">• Establish monitoring over plans |

Agenda Item 7:

Public Comment

Agenda Item 8:

Closing Comments and Next Steps